C-2 Rev. 04/04



CAMPAIGN FINANCIAL DISCLOSURE REPORT

POSTED

SUMMARY PAGE (Please Print or Type)

07 FEB 15 AM 9: 17

Section 1				
Name of Candidate or Political Con DOLORES J. CROW	nntittee and Chairperson			STATE OF 13A ATE
Mailing Address 203 S. OLIVE	☐ Check if address change.	City and Zip NAMPA, 83686	Home Phone	Work Photol A 110 467-9330
Name of Political Treasurer MICHAEL CROW				
Mailing Address	☐ Check if address change.	City and Zip	Home Phone	Work Phone
203 S. OLIVE	•	NAMPA, 83686		467-9330
Section II		TYPE OF REPOR		
Directions: To indicate the instructional manual for rep	orting periods and due da	tes.		
This repor 7 Day Pre-Primary	t is for the period from Report			ber 10 Pre-General Report
☐ 7 Day Pre-General		30 Day Post-General Re	port 🕜 Annu	ual Report
Semi-Annual Repo	ert (Statewide Candidates	Only)		
Is this Report as Section III	statement? 7 Yes		s a Termination Report? S OR EXPENDITURES	
	5			
Directions: If you had no ed the appropriate dates and sig Section IV.	ontributions or expenditur gn this report. Be sure to	es during this reporting carry forward the appro	period, check the box no priate "Calendar Year to	ext to the statement below, fill in Date" figures in Column II,
	hat I have received no cor	ntributions and have ma	de no expenditures durin	g this reporting period ·
Section IV		CUMMADY		
To reach your Calendar Yea figures to the Column II figu			COLUMN I This Period	COLUMN II Calendar Year to Date
Line 1: Cash on Hand Janua	ıry 1, This Year*		\$_XXXXXX	\$
Line 2: Enter Cash Balance	at Close of Last Reportin	g Period**	\$ 7,323,62	\$ XXXXXX
Line 3: Total Contributions	(Enter amount from page	2)	\$_ 	S <u></u>
Line 4: Subtotal (Add lines	1, 2 and 3)		\$ 7,323.62	\$ 7,323.62
Line 5: Total Expenditures (Enter amount from page 2	2)	\$ 7,323.62	5 - 7, 323.62
Line 6: Cash Balance at Close of Period (Subtract line 5 from line 4)**			\$_6	\$
Line 7: Outstanding Debt to	Date		\$ 6	
*This same figure should be **You must report the cash Note that the closing each b	on hand at both the begin	ning of the reporting pe	riod and the close of the	reporting period.
	Section V		TIFICATION	with the manual
Return This Report To: Ben Ysursa		_	_	y contity that the information
Secretary of State PO Box 83720		is a true, complete and	correct Campaign Finan	y certify that the information cial Disclosure Report as
Boise ID 83720-0080 phone: (208) 334-2852	required by I	aw.	(harin Ed)	
fax: (208) 334-2282	Signature of Political Treasurer			

DETAILED SUMMARY PAGE

Name of Candidate or Committee DOLORES J. CROW			Report Covering the Period From11 / 18 / 06 to12 / 31 / 06	
	UNITEMIZE Contributions of Fifty I	D CONTRIBUTIO		
	Total Number 🕳	Total Amount \$e	a. ((d) (m) - A	
UNITEMIZED EXPENDITURES Expenditures of Less Than Twenty-Five Dollars (\$25.00) This Period				
	Total Number	Total Amount S		

	Total This Period
Number of Schedule A pages Attached	
Contributions	
Uniternized Contributions (\$50 and less) from top of page	S
Itemized Contributions (total all Schedule A sheets)	\$
Total Contributions (also enter this figure on page 1, Section IV, line 3)	S
Number of Schedule B pages Attached	
Expenditures	
Unitemized Expenditures (less than \$25) from top of page	\$
Itemized Expenditures (total all Schedule B sheets)	\$ 5.846.50 732
Expenditures to Reduce Accounts Payable (total all Schedule C-2Bs - Payment this Period)	\$ 0
Total Expenditures (also enter this figure on page 1, Section IV. line 5)	\$ 5,846.50 7,32 \$ 5,846.50 7,32
Number of Schedule C-2B pages Attached	6
Incurred Expenditures	
Outstanding Balance from previous period (from previous report, page 1, Section IV. line 7	s e
Amount Incurred this period (Total all Schedule C-2Bs - Amount Incurred this Period)	+ \$ &
Subtotal	= S &
Payment this Period (Total all C-2Bs - Payment this Period)	- \$ &-
Total Outstanding Balance at close of this period (enter on page 1, Section IV. line 7)	= \$
Number of Schedule C-2A pages Attached	
Pledged Contributions	
Amount Pledged this Period	\$ 0

Name of Candidate or Committee

SCHEDULE B ITEMIZED EXPENDITURES

Page	 of
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of Twenty-Five Dollars (\$25.00) or more this period

DOLORES	J. CROW		Column B
		Column A	Column B
Date	Full Name, Mailing Address and Zip Code of Recipient	Cash or Check	In-Kind (non-monetary)
217106	"CANYON CO. CENT. COMM. 504 16th AVE, SO NAMPA, ID 83686	s_700.00	s
Purpose of Abov	ve Expenditure: GINCOLN DAY		
3126106	JONES FOR CONTROLLER 504 16th AVE. SO. NAMPH. ID 83686	s <u>z, noo.oo</u>	s
Purpose of Abo	ove Expenditure: CONTRIB.		
	GARY BAUER FOR REP. 625 CHERRY LANE NAMPA ID 83687	S_1,000.00	S
Purpose of Abo	ve Expenditure: CON +Rib.		
41_106	BEENT CRANE FOR REP.	\$ 4,000,00	\$
41 106	NAMPA, ID 83686	s_ 150,00	s
Purpose of Abo	ove Expenditure: PRESS RELEASES		
5115106	"CANYOR CO. CENT. COMM.	\$	\$
Purpose of Abo	we Expenditure: Roundup		
	Subtotals of Columns A & B	\$ 5060.00	s
	Total This Page (add columns A & B)		s_ 506 0.00

SCHEDULE B ITEMIZED EXPENDITURES

Page	of
	1
1 2	1 7

of Twenty-Five Dollars (\$25.00) or more this period

Name of Candie	date or Committee J. CROW		
		Column A	Column B
Date	Full Name, Mailing Address and Zip Code of Recipient	Cash or Check	In-Kind (non-monetary)
615106	Statesman P.O. BOX 690040 BOISE ID 83799	s 95.60	\$
Purpose of Abo	ve Expenditure:		
	DOISE, ID 83701	s_500.00	s
Purpose of Abo	ove Expenditure: CONTE; basion		
	1. U.S. Post Office NAM &# ID 83651</td><td>s 81.90</td><td>s</td></tr><tr><td>Purpose of Abo</td><td>ove Expenditure: PosfaqE</td><td></td><td></td></tr><tr><td>10:3 106</td><td>PRESS TRIBUNE NAMPH ID 83651</td><td>s //1.00</td><td>s</td></tr><tr><td>Purpose of Abo</td><td>ve Expenditure: Spl</td><td>,</td><td></td></tr><tr><td>21 107</td><td>"LibERTY CHARTER SCHOOL NAMPH ID 83686</td><td>\$ 500.00</td><td>5</td></tr><tr><td>Purpose of Abo</td><td>ove Expenditure: don 4 Li on</td><td></td><td><u> </u></td></tr><tr><td>01 01</td><td>Middleton High School BAND Fund Middleton, ID</td><td>\$ 250,00</td><td>s</td></tr><tr><td colspan=4>Purpose of Above Expenditure: downfor</td></tr><tr><td></td><td>Subtotals of Columns A & B</td><td>s -0.00- (538,50</td><td>s0.00</td></tr><tr><td></td><td>Total This Page (add columns A & B)</td><td></td><td>s 0.00</td></tr></tbody></table>		

Name of Candidate or Committee

SCHEDULE B ITEMIZED EXPENDITURES

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of Twenty-Five Dollars (\$25.00) or more this period

DOLORES	3 J. CROW		
		Column A	Column B
Date	Full Name, Mailing Address and Zip Code of Recipient	Cash or Check	In-Kind (non-monetary)
3 1 107	BEETHREN CLURCH AFRICH MISSION FUND-C/OREV. J. HARDEN BROOK NAMPA, ID 83686	s_350.00	s
Purpose of Abo	ove Expenditure: donation		
21_107	2 CROSSROADS COMMUNITY Church, Building fund 4152 E Amily Tue NAMPH, ID 83686	\$ <u>350.00</u>	s
	ove Expenditure:		
<u> </u>	HALLMARK STORE KARCLER MALL NAMAR, FD 83651	s <u>25.12</u>	s
Purpose of Ab	OVAMAR, ID 8365) OVE Expenditure: HANK YOU CARds		
	4.	s	s
Purpose of Ab	ove Expenditure:		
	5.	s	s
Purpose of Ab	ove Expenditure:		
	6.	\$	s
Purpose of Ab	ove Expenditure:		
	Subtotals of Columns A & B	575212000 725.12	s
	Total This Page (add columns A & B)		s -0.00-